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(Re	equestor's Name)	
(Address)		
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K.SALY EXAMINER SEP -7 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Christian Frost Holdings II, LLC Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for f	iling.
Please return all correspondence concerning this matter to the following:	
Donald B. Linsky Name of Person	
Donald B. Linsky & Associates, P.A. Firm/Company	
1509B Sun City Center Plaza Address	
Sun City Center, Florida 33573 City/State and Zip Code	
donald@linskylaw.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Donald B. Linsky at (813) 634-5566 Name of Person Area Code & Daytime Telephone Num	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	
\$25 Filing Fee \$\times \text{\$55 Filing Fee & Certified Cop}\$	y

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

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Name of the limited liability company:	Christian Frost Holdings II, LLC
2. (a) Principal office address of limited liability cor	npany:
(Note: MUST BE STREET ADDRESS)	6812 West Linebaugh Ave. Tampa, FL 33625
(b) Mailing address of limited liability company:	-
(Note: MAY BE POST OFFICE BOX)	6812 West Linebaugh Ave. Tampa, FL 33625
03/18/2011	L11000033331
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	
Registered Agent:	Francena Gargaro
Registered Office Address:	6095 NW 167th Street, Suite D7 Hialeah, FL 33015
(b) Enter name of <u>NEW Registered Agent</u> and/o	
NEW Registered Agent:	Francena Gargaro
NEW Registered Office Address: [MUST BE FLORIDA STREET ADDRESS]	6812 West Linebaugh Ave.
MOST BE PEORIDA STREET ADDRESS	Tampa ,FL33625
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability confirmed that the characteristic of a member of authorized representative of a member	the Florida street address of the registered office identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote
Signature of a member or authorized representative of a member	
Francena Gargaro Printed or typed name of signee	
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability con	and agree to act in this capacity. I further agree to he proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany has been notified in writing of this change.
Signature of Registered Agent	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00